

Case Number 09-31389 - HEAVIRLAND SR, TERRY L

Creditor	Claim No.	Amount Allowed	Amount Paid
FAIRMONT MED CENTER 800 MEDICAL CENTER DR PO BOX 928 FAIRMONT MN 56031	000001	31.25	1.03

----- Remittance Total -----		31.25	1.03
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CHARLES W. RIES, Trustee

RECEIVED  
10 SEP 20 AM 11:16  
U.S. BANKRUPTCY COURT  
ST. PAUL, MN